

AREA COMMISSION APPOINTMENT FORM

The Department of Neighborhoods maintains the database for the Area Commission members in the City of Columbus. The information on this form is used to process the Mayor's appointment and ensure timely and accurate distribution of meeting notices, training opportunities, and other City activities. Please complete all sections of the form with information about your recently elected/appointed commissioner within seven (7) days of the election/appointment. After completing and signing this form, please return it, along with the appointees resume and/or biography to your Neighborhood Liaison via email. Please contact your Neighborhood Liaison with any questions or comments.


Please Type

Area Commission Name	Northeast Area Commission
----------------------	---------------------------

Please check appropriate box	<input checked="" type="checkbox"/> New appointment	<input type="checkbox"/> Reappointment
	Are there changes to this information? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

First Name	Aaron
Last Name	Wosley
Title (i.e. officer / commissioner)	Commissioner
Address	2476 Parkwood Avenue
City	Columbus
State	Ohio
Zip Code	43211
Home Telephone	614-906-3967
Work Telephone	
Email Address	Awoosley1234@gmail.com
District/Designation	At-Large
Term Start Date	01/01/2023
Term Expiration	12/31/2025
Seat Succession	Alice Porter

Area Commission Chair Signature _____



ALL SECTIONS OF THIS FORM MUST BE COMPLETED

DISCLAIMER: all information and materials that you submit in support of your appointment as an area commissioner are subject to Ohio Public Records Law